

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: 2001

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Charles City Housing and Redevelopment Authority

PHA Number: IA002

PHA Fiscal Year Beginning: (mm/yyyy) 07/2001

PHA Plan Contact Information:

Name: Debra Bullerman

Phone: 641/228-6661

TDD:

Email (if available): cchra@willowtree.com

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☒ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered:

☒ Public Housing and Section 8 ☐ Section 8 Only ☐ Public Housing Only

Annual PHA Plan
Fiscal Year 2001
 [24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

This requirement eliminated by PIH 99-51 (HA) issued December 14, 1999.

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

Updated Pet Policy: size limit, only front paws of cats need to be declawed, pets can not be left unattended for more than 24 hours, pets must be monitored when tethered outside and require two alternate custodians for pet when owner is unavailable.

Acceptable method of verification of social security numbers expanded to include insurance papers, drivers license, etc.

Clarification regarding removal of applicants from the waiting list to indicate a request made by the applicant can be made in writing or verbally.

Insert statement into ACOP and lease that residents who fail to reside in the unit for less than six months will forfeit their security deposit.

Include statement in lease that failure to keep utilities paid current and connected is cause for termination as it makes the unit inhabitable.

Remove reference of Request for Reasonable Accommodation Form being available since it is stated in most correspondence that reasonable accommodations will be made upon request.

Clarify statement to read "Any changes or additional information reported to the CCHRA Housing Authority will be documented in the applicant file". It previously stated ALL correspondence would be documented in the file.

Term of Voucher revised to "Sixty day extensions may be granted up to a total of 365 days as long as the family can demonstrate evidence of looking for qualified housing".

Provide examples of extraordinary circumstances that can cause a hardship in regard to allowing people to port. Examples include: "flood, change of family composition, medical reasons or relocation due to employment".

Update Appendices in Plan (utility allowance schedule, fair market rents, etc.)

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. X Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 212,664

C. X Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes X No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to next component ; if “yes”, complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☐ Yes X No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A. ☐ Yes X No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____

C. ☐ Yes X No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. X Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are Attached at Attachment (File name) Comments of RAB

3. In what manner did the PHA address those comments? (select all that apply)

- ☐ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 - ☐ Yes ☐ No: below or
 - ☐ Yes ☐ No: at the end of the RAB Comments in Attachment _____.

- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
- X Other: (list below) Made changes to the Administrative Plan and Admissions and Continued Occupancy Plan.

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here) This requirement is eliminated as specified in 24 CFR Part 903.15(a)(1)) for the Small PHA Plan Update submission.
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - ☐ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
 - ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
 - ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
 - ☐ Other: (list below)
3. PHA Requests for support from the Consolidated Plan Agency
 - ☐ Yes ☐ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan: A substantial change is any fundamental alteration of the agency's Mission or Goals and Objectives as determined by the Board of

Commissioners. Any such change will be subject to review and approval requirements of the original Agency Plan as per HUD regulations.

B. Significant Amendment or Modification to the Annual Plan: A significant amendment or modification to the plan is any fundamental alteration of the agency's Mission or Goals and Objectives as determined by the Board of Commissioners. Any such change will be subject to review and approval requirements of the original Agency Plan as per HUD regulations.

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
✕	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
NA	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
✕	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement. <u>(Agency has adopted a Fair Housing Policy)</u>	5 Year and Annual Plans
NA	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
✕	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
✕	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
NA	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
✕	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
✕	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
✕	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
✕	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
✕	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
✕	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
NA	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
✕	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
NA	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
✕	Public housing grievance procedures X check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
✕	Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
✕	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
NA	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
✕	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
NA	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
NA	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
✗	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
NA	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
NA	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
✗	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) X check here if included in the public housing A & O Policy	Pet Policy
✗	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
NA	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report ATTACHMENT B					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Charles City Housing & Redevelopment Authority		Grant Type and Number Capital Fund Program: IA05P00250100 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:					
<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	\$15,000	\$15,000	-0-	\$15,000
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	\$49,695	\$43,795		\$2,038
10	1460 Dwelling Structures	\$135,800	\$151,229	\$16,020	-0-
11	1465.1 Dwelling Equipment—Nonexpendable	\$12,169	\$2,640		\$10,945
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$212,664	\$212,664	\$16,020	\$27,983
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report		ATTACHMENT B	
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary			
PHA Name: Charles City Housing & Redevelopment Authority		Grant Type and Number Capital Fund Program: IA05P00250100 Capital Fund Program Replacement Housing Factor Grant No:	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost	
24	Amount of line 20 Related to Energy Conservation Measures	\$70,209	\$70,209

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Charles City Housing & Redevelopment Authority		Grant Type and Number Capital Fund Program #: IA05P00250100 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
Agency Wide	Administration	1410		6,000	6,000		6,000	Initiated
	Contracted maintenance	1410		6,000	6,000		6,000	Initiated
	Web Page	1410		3,000	3,000		3,000	Initiated
IA-001	Additional parking	1450		35,000	35,000			Weather!
	Sidewalk repair	1450		2,000	1,000			Weather!
	Signs (exterior entrance)	1450		4,000	100			Weather!
	Exterior lighting	1450		2,000	1,000			Weather!
	Landscaping	1450		395	395			Weather!
	Bathroom vanities & sinks	1460		15,000	15,000			Bid prep.
	Water shut offs – sinks & toilets	1460		5,000	5,000			Bid prep.
	Install range hood vents	1460		4,000	9,778	9,778		90% done
	Fire extinguishers	1465		1,600	1,600		1,600	Completed
	Exterior doors	1465		4,529	83,05		8,305	Completed
IA-002	Sidewalk repair	1450		2,000	1,000			Weather!
	Signs (exterior entrance)	1450		4,000	100			Weather!
	Landscaping	1450		500	200			Weather!
	Bathroom vanities & sinks	1460		9,000	9,000			Bid prep.
	Water shut offs – sinks & toilets	1460		3,000	3,000			Bid prep.
	Replace patio doors	1460		38,000	38,000			Bid prep.
	Install range hood vents	1460		2,600	6,242		6,242	Completed
	Furnaces	1460		1,866				Bid prep.
IA-002	Fire extinguishers	1465		1,040	1,040		1,040	Completed

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Charles City Housing & Redevelopment Authority		Grant Type and Number Capital Fund Program #: IA05P00250100 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
IA-005	Playground equipment	1450		4,000	-0-			
	Landscaping	1450		500	500			Weather!
	Sidewalks	1450		6,500	4,500			Weather!
	Kitchen/bath countertops/vanities	1460		28,000	28,000			Bid prep.
	Hot water heaters	1460		5,000	5,000			Bid prep.
	Furnaces	1460		20,000	20,000			Bid prep.
	Siding	1460		-0-	2,038		2,038	Completed

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Charles City Housing & Redevelopment Authority			Grant Type and Number Capital Fund Program #: IA05-00250100 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2000
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IA-001				12-31-01			
IA-002				12-31-01			
IA-005				12-31-01			
Misc.				12-31-01			

ATTACHMENT C**Capital Fund Program 5-Year Action Plan**

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
IA-001	Cedar Terrace South	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
HWY 218 beautification improvements: our contribution to local grant for our property line	11,100	2001
Riverbank beautification improvements—clean up and repair after flood of 1999	4,500	2001
Expand community room for resident activities	40,000	2002
Furnishings for community room chairs/tables, etc	1,500	2002
Insulation in attics	6,000	2002
Replace flooring in 8 units	9,600	2002
Property improvements (benches, picnic tables, landscaping)	1,000	2002
Replace flooring in 10 units	12,000	2003
Build tornado shelter	35,000	2003
Riverbank beautification – completion from 2002	10,000	2003
Replace kitchen water faucets with high arch faucets (accessibility)	10,000	2003
Insert sliders to convert cupboards (accessibility)	4,000	2003
Replace gutters/eaves	12,000	2003

Replace flooring (16 units)	19,200	2004
Purchase sweeper for mower/blower	4,000	2004
Replace toilets with high-rise toilets (accessibility)	5,500	2004
Replace coin-op washers and dryers	7,800	2004
Replace riding lawn mower/blower	15,000	2004
Replace flooring (10 units)	12,000	2005
Replace stoves	32,000	2005
Replace refrigerators	42,000	2005
Replace antenna system	9,500	2005
Total estimated cost over next 5 years	303,700	

CFP 5-Year Action Plan		
<input type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
IA-002	Cedar Terrace North	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Property improvements (benches, landscaping)	500	2001
New parking lot, sidewalk and lighting	50,000	2002
Furnishings for community room chairs/tables, etc	1,000	2002
Insulation in attics	3,000	2002
Replace flooring in 10 units	12,000	2002
Replace heating elements/thermostats	30,000	2002

Replace flooring in 10 units	12,000	2003
Build tornado shelter	25,000	2003
Replace gutters/eaves	12,000	2003
Expand community room for resident activities	24,000	2003
Replace riding lawn mower/blower	15,000	2003
Install outside electrical outlets	3,600	2003
Replace living room closet doors	6,000	2003
Replace flooring (15 units)	18,000	2004
Replace toilets with high-rise toilets (accessibility)	6,000	2004
Replace flooring (10 units)	12,000	
Replace coin-op washers and dryers	6,300	2005
Replace stoves	32,000	2005
Replace refrigerators	42,000	2005
Replace antenna system	9,500	2005
Total estimated cost over next 5 years	319,900	

CFP 5-Year Action Plan		
<input type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
IA-005	Morningside	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
No improvements proposed at this site for 2001	-0-	2001
Insulation in attics	4,800	2002
Playground equipment/picnic table	10,000	2002
Replace flooring in 10 units	4,800	2002
Replace kitchen cupboards (4 units)	8,000	2002
Replace interior doors, bifold doors, etc.	11,000	2002

Replace flooring (4 units)	4,800	2003
Replace kitchen cupboards (4 units)	8,000	2003
Replace flooring (4 units)	4,800	2004
Replace interior doors, bifold doors, etc.	15,000	2004
Replace kitchen cupboard (4 units)	8,000	2004
Playground equipment	15,000	2004
Architectural evaluation	5,000	2004
Repairs to exterior structure	40,000	2004
Repair parking lot	45,000	2004
Replace flooring (4 units)	4,800	2005
Replace kitchen cupboard (4 units)	8,000	2005
Total estimated cost over next 5 years	197,000	

CFP 5-Year Action Plan		
<input type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
	PHA Wde	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Renovate limestone home in historical district for office space	190,000	2001
Administration	2,000	2001
Contracted maintenance	4,000	2001
Laminator	1,000	2001
Phone system	3,800	2001

Administration	8,000	2002
Contracted maintenance	6,000	2002
Two fire proof 4-drawer filing cabinets	5,200	2002
Waiting and meeting room table and chairs	5,000	2002
Printer	1,200	2002
Administration	8,000	2003
Contracted maintenance	6,000	2003
Laptop computer	2,500	2003
Computer upgrades	12,000	2003
Administration	8,000	2004
Contracted maintenance	8,000	2004
Administration	8,000	2005
Contracted maintenance	8,000	2005
Total estimated cost over next 5 years	286,700	

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

B. Eligibility type (Indicate with an "x") **N1** _____ **N2** _____ **R** _____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an “x” to indicate the length of program by # of months. For “Other”, identify the # of months).

12 Months_____ **18 Months**_____ **24 Months**_____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						

FY 1999						
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Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY _____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match	Total PHDEP Funding: \$
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Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
---------------------------------------	--	--	--	--	--------------------------------	--	--

Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention		Total PHDEP Funding: \$
Goal(s)		
Objectives		

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9170 - Drug Intervention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$				
Goal(s)									
Objectives									

Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment D: Resident Member on the PHA Governing Board

1. X Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: Darlene Ploeger

B. How was the resident board member selected: (select one)?

☐ Elected

X Appointed

B. C. The term of appointment is (include the date term expires): two years

04/01/2003 (just appointed to fill vacancy created by previous resident member)

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
- ☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

☐ Other (explain):

B. Date of next term expiration of a governing board member: 02/01/2002

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mayor James Erb

Required Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Deb Bullerman
Margaret Calvert
Garland Ceradsky
Deena Downs
Sharon Madsen
Joan Nelson
Shirley Platte
Darlene Ploeger
Diane Stewart
Malinda Welton
Donna White

ATTACHMENT F

ADVISORY BOARD MEETING
SUMMARY OF AGENCY PLAN MEETING
FEBRUARY 8, 2001 2:00 – 4:00 P.M.

PRESENT: Donna White and Margaret Calvert, HRA Board Members; Diane Stewart and Garland Ceradsky, Residents of NCT; Malinda Welton, CHSP Case Manager; Shirley Platte, Deena Downs and Deb Bullerman, HRA Staff

The Board was reminded of the purpose of meeting again to update the Agency Plan and review policies

The majority of the time was spent on reviewing the Pet Policy with the following specific items being discussed.

Comment: It was felt there should be a limitation on size of pets; some felt weight and size should be a factor. Although size does not determine the personality of the pet, there was concern over pets getting loose and knocking people over or jumping up on them.

Decision: A height limit of 24" at shoulder to ground would be used to limit size of pets.

Comment: Reconsidered requiring cats to have all four paws declawed. By allowing them to retain the back claws would provide them with a defensive mechanism in the event they did get loose.

Decision: Require only front paws to be declawed.

Comment: Allow pets (dogs) to be left unattended for more than 12 hours as proposed before the Housing Authority can enter the dwelling unit and remove the pet. Cats, birds and fish do not apply to this section as they can be left unattended for several hours and in some instances for several days.

Decision: Allow for dog to be unattended for a period of up to 24 hours before the Housing Authority can enter the dwelling unit and remove the pet.

Comment: Need to add a statement prohibiting pets to be tethered outside unattended.

Decision: Add the following statement "Cats and dogs can only be tethered outside of unit when monitored by owner".

Comment: There was concern raised about having only one alternate custodian reported to the office. There could be a time when that one contact would be unavailable and then what recourse would the Housing Authority have.

Decision: Change policy to require at least two alternate custodians to be provided to the Housing Authority

Comment: There were concerns whether residents should be allowed to “pet sit” or have “visiting” pets.

Decision: The following policy was agreed upon “Residents will be able to have visiting pets for a period not to exceed 48 hours.

Other items reviewed and discussed contained in the Admissions and Continued Occupancy Plan (ACOP) include:

Comment: ACOP currently states a TDD is available for the deaf. Due to incapability of current phone system and TDD equipment, staff now utilizes a service known as Relay Iowa.

Decision: Change ACOP to reflect the use of Relay Iowa when necessary.

Comment: ACOP is unclear as to what is an acceptable method of verification of social security numbers.

Decision: Include list of acceptable methods of verification for social security which will include drivers license, insurance papers, documents from SSA, DHS or other reliable sources.

Comment: Clarification needed regarding removal of applicants from the waiting list. Currently ACOP states applicants must request in writing to be removed from the list, however, often times they call into the office with their request and never send it in writing. Either way, staff currently sends a letter to the applicant stating they are being removed per their written or verbal request. If it were not correct, the applicant is then requested to contact the Housing Authority.

Decision: Add to ACOP that the applicant may request in writing or verbally to be removed from the waiting list. Staff will continue to send letter of confirmation.

Comment: Due to the number of applicants who use the public housing program as “transitional housing” while they wait to reach the top of the Section 8 waiting list, it was suggested that failure for them to remain in their public housing unit for a minimum of six months would require them to forfeit their security deposit.

Decision: Insert statement into ACOP that residents who fail to reside in the unit for a minimum of six months will forfeit their security deposit.

Comment: Need to add clarification to section regarding cause of termination of lease by Housing Authority to include disconnection of utilities.

Decision: Add failure to keep utilities paid current and connected is cause for termination, as it makes the unit uninhabitable.

Comment: Need clarification added to section in regard to resident’s right to legal counsel at their own expense.

Decision: Add statement that resident has the right to be represented by counsel or other person at their own expense.

**ADVISORY BOARD MEETING
SUMMARY OF AGENCY PLAN MEETING
FEBRUARY 22, 2001 9:00 – 11:00 A.M.**

PRESENT: Diane Stewart, Sharon Madsen, and Garland Ceradsky, Residents of NCT; Darlene Ploeger, Resident of SCT; Malinda Welton, CHSP Case Manager; Shirley Platte, Deena Downs, Joan Nelson and Deb Bullerman, HRA Staff.

The summary from the February 8, 2001, meeting were discussed briefly. Everyone felt the summary was accurate.

The Board was reminded of the public hearing to be held on Monday, April 9, 2001 at 7:00 p.m. at the Council Chambers at City Hall. They were invited to attend.

The Section 8 Administrative Plan was reviewed and the following was discussed:

Comment: There is reference in the Plan that states we would provide a Request for Reasonable Accommodation Form for applicants/participants.

Decision: After discussion, it was agreed that reference to the form could be removed since almost all correspondence that is mailed out already includes a statement that reasonable accommodations can be requested.

Comment: It was recommended that the statement requiring staff to document each applicant file anytime there is a contact be revised.

Decision: Everyone agreed that documentation of every contact was not necessary. The section will be revised to state, "Any changes or additional information reported to the CCHRA Housing Authority will be documented in the applicant file."

Comment: The section in reference to the Term of the Voucher needs to be updated to reflect a longer time frame for which families can look for housing. It currently states families have extensions not to exceed 120 calendar days.

Decision: The section will be revised to state "Sixty day extensions may be granted up to a total of 365 days as long as the family can demonstrate evidence of looking for qualified housing".

Comment: The Plan states that under portability, families could move only under extraordinary circumstances that would cause a hardship. It was felt that examples of extraordinary circumstances should be provided.

Decision: The following examples will be included in the section: "flood, change of family composition, medical reasons or relocation due to employment".

Comment: Appendices in the back of the Plan need to be updated.

Decision: Insert updated information regarding utility allowance schedules, payment standards and fair market rents.

ATTACHMENT G

PROGRESS IN MEETING THE FIVE-YEAR PLAN MISSION AND GOALS

This agency is pleased with the success of striving to meet the goals and objectives that were outlined in the first PHA Agency Plan.

One goal of this agency is to manage programs efficiently and effectively. Making the public housing units more marketable in the community that would be evident by 100% lease up and an increased waiting list to reflect a 6-month waiting period would do this; continue to be recognized as a high performer and promote a motivated work environment and customer-friendly that will be verified by a passing score on the RASS.

Last year our occupancy rate was at 91.8%, however, utilizing CFP funds, advertising, marketing the program and units, we are pleased to report that the current lease up rate is at 98.6%. The waiting list is currently up to a six month waiting period for the elderly properties and two months for the family property.

The second goal was to enhance the marketability and image of the public housing programs. Staff makes presentations to community organizations, property owners and service agencies; writes articles for the local newspaper, and tries to have features in the paper announcing all the activities going on in the agency and by residents. Utilization of the CFP has permitted this agency to make considerable modernization improvements to family units that has been extremely helpful in leasing units.

Thirdly, our goal is to have developments that provide safe and decent living environment. We have established a formal preventative maintenance plan that records services performed. This includes ongoing maintenance items for equipment, grounds and annual inspections.

The fourth goal was to provide housing options which could include home ownership or rehabilitation funds for homeowners. We are pleased to advise that this agency was notified of approval to administer the owner-occupied rehabilitation program and was awarded \$400,000 with work to begin by the end of April 2001.

It is our feeling that we have had a successful year and look forward to progressing further ahead.